

RCE/6/5
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I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 50, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.

BY:

Date:

May 17, 2004

MAIL STOP RCE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re:	Patent Application of Peter Watts	:	Group Art Unit 1615
Conf. No.:	5106	:	
Appln. No.	09/749,152	:	Examiner: Susan Tran
Filed:	December 27, 2000	:	
Title:	COLONIC DRUG DELIVERY COMPOSITION	:	Attorney Docket No. 10774-21U1 (WESZ/P14089U1)(P-0129)

**AFTER FINAL REQUEST FOR CONTINUED EXAMINATION (RCE)
UNDER 37 C.F.R. 1.114**

This is a Request under 37 CFR 1.114 for Continued Examination (RCE) of the above identified application in response to the Office Action mailed February 17, 2004 (marked "part of Paper No./Mail Date 20040129"). Enclosed are the following in support of the RCE under 37 C.F.R. 1.114:

- ☐ Enter the unentered Amendment previously filed on _____ under 37 CFR 1.116 in the above application.
- ☒ An Amendment After Final.
- ☐ An Information Disclosure Statement, PTO/SB/08A and cited references.
- ☐ New formal drawings.
- ☐ A Petition for Extension of Time to _____ for the pending application.
- ☐ Other:

The following fees are enclosed:

- ☒ RCE fee of \$770.00 required under 37 C.F.R. 1.17(e).

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- ☐ Extension of time fee in the amount of \$____.00
- ☐ Additional claim fees of _____ for excess claims submitted in the enclosed Amendment, calculated as follows:

					SMALL ENTITY		LARGE ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL		(-)	or 20		x9		x18	
INDEP.		(-)	or 3		x43		x86	
<input type="checkbox"/> 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					+\$145		+\$290	
					TOTAL		TOTAL	

- ☒ Firm check totaling \$770.00 is enclosed herewith.
- ☒ The Commissioner is hereby authorized to charge and/or credit Deposit Account No. 50-1017 (Billing No. 2107743.0022) as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee(s).
- ☐ RCE fee in the amount of \$____.00.
- ☐ Extension fee in the amount of \$____.00.
- ☐ Additional claim fee(s) in the amount of \$____.00 as calculated above.
- ☒ Any additional fees required under 37 C.F.R. §§ 1.16 or 1.17.
- ☒ In the event that a Petition for Extension of Time is required, but not enclosed, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

PETER WATTS

17 May 2004 By: 
 (Date) **KRISTYNE A. BULLOCK**
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